Image# 28935228182 FEC FORM 2 STATEMENT OF CANDIDACY

1. (a) Name of Candidate (in full)										
Gary L. Ackerman										
,	(b) Address (number and street)						Identification Number			
113 Deer Run					H4NY07					
(c) City, State and ZIP Code	1	NIV	44577		3. Is This Statemen	nt X New	OR	Amended (A)		
Roslyn Heights 4. Party Affiliation	5. Office Sou	NY ught	11577	6. State & Dis		(11)	- On	(A)		
DEMOCRATIC PARTY	House	agni		NY 05		uale				
-		N OF PRI	ACIDAL C							
Di	SIGNATIC	IN OF Phil	NCIPAL C	AMPAIGN	COMMITTI	<u>CC</u>				
7. I hereby designate the following name	d political com	mittee as my Pr	incipal Campa	aign Committee		2010 (year of election	_ election	on(s).		
NOTE: This designation should be	filed with the	appropriate of	fice listed in	the instruction	s.					
(a) Name of Committee (in full)										
Committee to Elect Gary L. Ac	kerman, Inc.									
(b) Address (number and street)										
100 Jericho Quadrangle, # 23	3									
(c) City, State and ZIP Code										
Jericho		NY	11	753						
DI	SIGNATIC	N OF OTH	IER AUTH	ORIZED C	OMMITTE	ES				
		(Including Joi	nt Fundraisir	ig Representa	tives)					
I hereby authorize the following name candidacy. NOTE:This designation should be					tee, to receive a	and expend fund	ds on bel	nalf of my		
(a) Name of Committee (in full)										
(b) Address (number and street)										
(c) City, State and ZIP Code										
DECLARATION OF					6 (House o	r Senate C	nly)			
9. I intend to expend personal funds exc	eeding the thre	shold amount (see 11 C.F.R.	400.9) by						
	9A	<u> </u>		0.00	for the prim	nary election, a	ınd			
9B 0.00					for the general election.					
If you do not intend to expend personal f	`									
I certify that I have ex	amined this S	tatement and t	o the best of	my knowledge		is true, correc	t, and co	omplete.		
Signature of Candidate						Date				
Gary L. Ackerman					12/22/2008					
NOTE: Submission of false, erroneo	us or incomple	ete information	may subject	the person sig	gning this Sta	tement to pena	alties of 2	2 U.S.C.§437g.		

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